## **CERTIFICATE OF INTERESTED PARTIES**

## FORM 1295

			1 of 1				
Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			OFFICE USE ONLY CERTIFICATION OF FILING				
Name of business entity filing form, and the city, state and country of the business entity's place of business.			4				
John King Construction, Itd			2023-978240				
Round Rock, TX United States							
governmental entity or state agency that is a party to the contract for which the form is			Date Filed:				
is a party to the contract for which the form is			01/31/2023				
	D	Date Acknowledged:					
Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.							
000000FireStationNo1							
Name of Interested Party City, State, Country (place of busin			Nature of interest				
City, State, Country (place of busin		and the second se					
Dhn Austin TX United Otata			Intermediary				
	5	X					
	and a sub-						
Ay name is John N. King							
Austin	TV	20202					
11	1	, <u>18727                                   </u>	US				
(City)	(state)	(zip code)	(country)				
I declare under penalty of perjury that the foregoing is true and correct.							
-	<b>A</b> 4						
County, State of,	on the 31	<sub>day of</sub> January	_, <sub>20</sub> _23_				
		(month)	(year)				
1 min							
Signature of authorized agent of contracting business entity (Declarant)							
	parties. e and country of the business entity's party to the contract for which the for mental entity or state agency to track o to be provided under the contract.  City, State, Country (place Austin, TX United States Aus	parties.       e         e and country of the business entity's place       2         is party to the contract for which the form is       0         mental entity or state agency to track or identify the to be provided under the contract.       0         City, State, Country (place of business       4         Austin, TX United States       1         Austin, Output       1	parties.       CERTIFICATIO         e and country of the business entity's place       CERTIFICATIO         uparty to the contract for which the form is       Date Filed:         01/31/2023       Date Filed:         01/31/2023       Date Filed:         01/31/2023       Date Acknowledged         mental entity or state agency to track or identify the contract, and provided under the contract.         City, State, Country (place of business)       Nature of (check a Controlling)         Austin, TX United States       X         Austin, TX United States       X				

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## **CERTIFICATE OF INTERESTED PARTIES**

## FORM 1295

					1 of 1			
	Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.							
Ļ				CERTIFICATION OF FILING				
1	Name of business entity filing form, and the city, state and coun of business.	ity filing form, and the city, state and country of the business entity's place			Certificate Number: 2023-978240			
	John King Construction, Itd							
	Round Rock, TX United States			Date Filed:				
2	Name of governmental entity or state agency that is a party to the being filed.	of governmental entity or state agency that is a party to the contract for which the form is filed.			01/31/2023			
	City of Round Rock	sk		Date Acknowledged: 02/02/2023				
3	Provide the identification number used by the governmental enti- description of the services, goods, or other property to be provide	number used by the governmental entity or state agency to track or identify the contract, and provide a s, goods, or other property to be provided under the contract.						
	000000FireStationNo1							
	General Construction							
4	Name of Interested Party City, State, Country (place)			Nature of interest				
			isiness)	(check applicable)				
		Austin, TX United States		Controlling X	Intermediary			
King, John Austin, TX United States								
5	5 Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is	, and my date of birth is						
	My address is	, .		,	, ·			
	(street)	(city)	(state)	(zip code)	(country)			
	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed inCount	y, State of, on t	the	_day of	, 20			
				(month)	(year)			
	Signature of authorized agent of contracting business entity (Declarant)							